

# Prevention Concepts and Principles

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The prevention concepts and principles discussed in this section are:

- o Risk and Protective Factors
  - o Social Ecological Model (SEM)
  - o Universal and Selected Populations
  - o Before and After Prevention Concept
  - o Integration of Before and After Prevention Concept and the Social Ecological Model
  - o Principles of Effective Prevention Programs (Educational Sessions)
  - o Integration of the Comprehensive Prevention Principle and the Social Ecological Model
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## Risk and Protective Factors

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Findings from research studies reveal some factors that may put people at risk for sexual violence perpetration and victimization or protect them from perpetrating or being victimized.

**Risk factors** are an attribute, situation, condition or environmental context that **increases the likelihood** of the occurrence of a health problem or behavior such as sexual violence.

**Protective factors** are an attribute, situation, condition, or environmental context that works to **decrease the likelihood** of the occurrence of a health problem or behavior such as sexual violence.

Being familiar with risk and protective factors will aid grantees in the development and/or enhancement of their sexual violence prevention programs. This information should be used to plan programs and to focus on strategies and/or programs that address the risk and protective factors for perpetration and/or victimization (Sexual Violence Prevention: Beginning the Dialogue, Centers for Disease Control and Prevention, 2004).

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**Please Note:** Risk and protective factors are characteristics of either the person or their environment that are more easily modified, such as an individual's attitudes, relationship skills, social norms, and cultural traditions.

Risk groups are identified by demographic variables that are not easily changed, such as sex, race, age, income and education (Cox, 2004).

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**Table 1** presents various factors that have been found to increase a male's risk of committing rape (Krug et. al, 2002).

Limited research is available on protective factors for sexual violence, the literature suggests for youth some examples of protective factors are connectedness with school, friends and adults in the community and emotional health (Centers for Disease Control and Prevention, Sexual Violence: Fact Sheet, 2007).

However, there are a number of risk and protective factors that are common to all types of violence. **Table 2** presents the various shared risk and protective factors that occur at multiple social ecology levels for all types of violence (Krug et. al, 2002).

For additional information on risk and protective factors, please refer to:

- o GTO IPV/SV Step 1
  - o WHO World Report on Violence and Health located at the below web address  
[http://www.who.int/violence\\_injury\\_prevention/violence/world\\_report/en/full\\_en.pdf](http://www.who.int/violence_injury_prevention/violence/world_report/en/full_en.pdf)
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**Table 1: Factors increasing men's risk of committing rape**

Individual Factors	Relationship Factors	Community Factors	Societal Factors
<ul style="list-style-type: none"> <li>Alcohol and drug use</li> <li>Coercive sexual fantasies and other attitudes and beliefs supportive of sexual violence</li> <li>Impulsive and antisocial tendencies</li> <li>Preference for impersonal sex</li> <li>Hostility towards women</li> <li>History of sexual abuse as a child</li> <li>Witnessed family violence as a child</li> </ul>	<ul style="list-style-type: none"> <li>Associate with sexually aggressive and delinquent peers</li> <li>Family environment characterized by physical violence and few resources</li> <li>Strongly patriarchal relationship or family environment</li> <li>Emotionally unsupportive family environment</li> <li>Family honor considered more important than the health and safety of the victim</li> </ul>	<ul style="list-style-type: none"> <li>Poverty, mediated through forms of crisis of male identity</li> <li>Lack of employment opportunities</li> <li>Lack of institutional support from police and judicial system</li> <li>General tolerance of sexual assault within the community</li> <li>Weak community sanctions against perpetrators of sexual violence</li> </ul>	<ul style="list-style-type: none"> <li>Social norms supportive of sexual violence</li> <li>Social norms supportive of male superiority and sexual entitlement</li> <li>Weak laws and policies related to sexual violence</li> <li>Weak laws and policies related to gender equality</li> <li>High levels of crime and other forms of violence</li> </ul>

**Table 2: Shared risk and protective factors for violence**

	Individual Level	Relationship/Family Levels	Community and Societal Levels
<b>Risk Factors</b>	<ul style="list-style-type: none"> <li>School failure</li> <li>Aggressiveness</li> <li>Substance use/abuse</li> <li>Depression/hopelessness</li> <li>Impulsivity</li> <li>Poor peer relationships</li> </ul>	<ul style="list-style-type: none"> <li>Dysfunction</li> <li>Witnessing violence at home</li> <li>Parental substance use/abuse</li> <li>Parental depression</li> </ul>	<ul style="list-style-type: none"> <li>Witnessing violence (media, policies)</li> <li>Community attitudes related to violence, suicide and gender roles/sexuality</li> </ul>
<b>Protective Factors</b>	<ul style="list-style-type: none"> <li>Problem solving skills</li> <li>Sense of self-efficacy</li> <li>Good peer relationships</li> </ul>	<ul style="list-style-type: none"> <li>Parental supervision</li> <li>Caring/respectful relationships</li> <li>Social support</li> </ul>	<ul style="list-style-type: none"> <li>Availability of services</li> <li>Support/belonging</li> </ul>

**Use of Data to Identify State Specific Risk and Protective Factors**

GTO IPV/SV Step 1 provides information on various existing sexual violence and intimate partner violence data sources. Some of those data sources (e.g. published data from research or national surveys, data locally generated through surveys, focus groups or other existing data sources) could be used to help identify state and/or community specific risk and protective factors and risk groups for sexual violence.

For some grantees, locally generated data may be the best available evidence to identify state and local risk factors. Examples of existing data sources may be call logs, chart reviews, hospital emergency department data.

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Local generated data could be collected through special collection activities e.g. surveys, focus groups, BRFSS (Behavior Risk Factor Surveillance System), and YRBS (Youth Risk Behavior Survey)<sup>1</sup>. Focus groups with adolescents may be very informative for determining local dating attitudes, norms, and youth culture.

Additionally, focus groups are an ideal way to “test” draft materials (media campaigns, curriculums, etc.) with representatives from the group(s) that may be the focus of such materials to ensure audience receptivity.

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What does not count as locally generated data? The opinions of researchers, advocates, health department personnel, school administrators etc. when used in isolation.

Ideally data should come from multiple sources so that such data can be compared and contrasted. For example, national surveys can be compared and contrasted with local surveys or focus group data to understand how a local community’s attitudes regarding sexual violence are similar or different from the attitudes across the country (Cox, 2004).

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**Please Note:** When using local data, issues and concerns related to confidentiality may arise; to ensure confidentiality, use aggregate data without personal identifiers.

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## Social Ecological Model (SEM)

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To prevent sexual violence, we have to understand what circumstances and factors influence its occurrence. There are many models that illustrate the risk and protective factors of sexual violence.

Each model contributes to a better understanding of sexual violence and helps practitioners to build programs that sustain protective factors and reduce risk factors. The Social Ecological Model (**Figure 1**), one such model allows the incorporation of risk and protective factors from multiple domains.

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Using the SEM provides a framework for understanding the complex interplay of individual, relationship, social, political, cultural, and

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<sup>1</sup> Applicants may not use more than 2% of the RPE award received each fiscal year for surveillance or prevalence studies

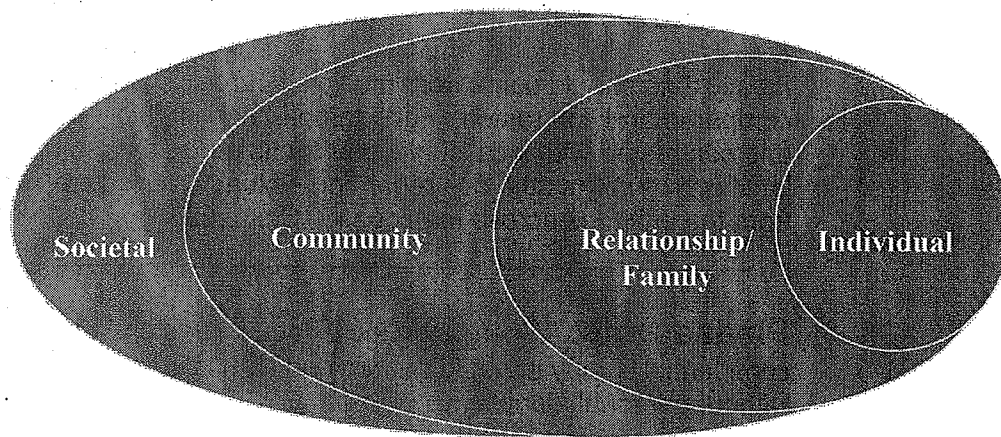
environmental factors that influence sexual violence and also provides key points for prevention.

The social ecological model supports a comprehensive public health approach that not only addresses individual risk and protective factors, but also the norms, beliefs, and social and economic systems that create the conditions for the occurrence of sexual violence.

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**Figure 1** illustrates the levels of the ecological model

**Figure 1: Social Ecological Model**



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### Definitions of the Social Ecological Model Levels

#### **Societal-level**

Societal-level influences are larger, macro-level factors that influence sexual violence such as gender inequality, religious or cultural belief systems, societal norms, and economic or social policies that create or sustain gaps and tensions between groups of people. For example, rape is more common in cultures that promote male sexual entitlement and support an ideology of male superiority.

Strategies<sup>2</sup>/programs for societal-level typically involve collaborations by multiple partners to change laws and policies related to sexual violence or

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<sup>2</sup> Strategy(ies) is defined as an approach to reduce violent behavior, such as social skills training, mentoring, social marketing, or policy changes. Definition adapted by the CDC GTO IPV/SV Development Team for the development of GTO IPV/SV.

gender inequality. (Sexual Violence Prevention: Beginning the Dialogue, Centers for Disease Control and Prevention, 2004). Strategies should focus on broad cultural, social or cultural norms, and economic factors related to violence.

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### **Community-level**

Community-level influences are factors that increase risk based on community and social environments and include an individual's experiences and relationships with schools, workplaces, and neighborhoods. For example, lack of sexual harassment policies in the workplace can send a message that sexual harassment is tolerated, and that there may be few or no consequences for those who harass others.

Strategies/programs<sup>3</sup> for community-level are typically designed to impact the climate, systems, and policies in a given setting that promote the violent behavior. Policy changes, social change strategies and opinion leader strategies are common approaches to modify the characteristics of settings such as schools, workplaces, and neighborhoods.

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### **Interpersonal Relationship/Family-level**

Interpersonal relationship/family-level influences are factors that increase risk as a result of relationships with peers, intimate partners, and family members. A person's closest social circle—peers, partners, and family members—can shape the individual's behavior and range of experience.

Strategies/programs to address for interpersonal relationship-level could include parenting training.

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### **Individual-level**

Individual-level influences are biological and can include personal history factors that increase the likelihood that an individual will become a victim or perpetrator of violence. For example, factors such as alcohol and/or drug use; attitudes and beliefs that support sexual violence; impulsive and other antisocial tendencies; preference for impersonal sex; hostility towards women; and childhood history of sexual abuse or witnessing family violence may influence an individual's behavior choices that lead to perpetration of sexual violence.

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Strategies/programs focus on changing an individual's knowledge, attitudes, and behavior through direct contact with that individual. Individual-level influences are often designed to target social and cognitive skills and behavior and include approaches such as educational training sessions that

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<sup>3</sup> Program is defined as the combination of several complementary strategies designed to deliver reinforcing messages to one or more populations in a variety of settings. Definition adapted by the CDC GTO IPV/SV Development Team for the development of GTO IPV/SV.

are knowledge-focused, knowledge/attitude focused, and social/life skills focused.

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## Universal and Selected Populations for Sexual Violence Prevention

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The primary prevention of sexual violence from a public health perspective focuses on preventing first-time perpetration and first time victimization. To facilitate this approach you will need to identify and address the needs of populations that have not experienced or perpetrated sexual violence.

For planning purposes, populations that have not experienced or perpetrated sexual violence are classified into two separate categories based differences in modifiable risk. These two categories are universal populations and selected populations.

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### What are Universal Populations?

A universal population is a population within your state or community that is defined **without** regard to individual risk for sexual violence perpetration or victimization (Krug et. al., 2002). A state or community may have multiple universal populations.

A universal population may include individuals with elevated risk for experiencing sexual violence, individuals at lower risk for experiencing sexual violence, as well as individuals who have already experienced or perpetrated sexual violence. **A key point to remember when identifying universal populations is that the population is defined without regard to risk.**

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### Examples of Universal Populations

Here are some examples of universal populations:

- o the population of an entire state,
  - o the population of an entire county,
  - o the population of an entire school, or
  - o the population of males ages 14-18 in a state
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### Benefit to Identifying Universal Populations

Defining universal populations is a critical aspect of primary prevention from the public health perspective. Through the identification of a universal population, strategies can be developed that reduce the overall risk for sexual violence for the entire universal population, including risk groups, often leading to overall reductions of sexual violence perpetration and

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victimization.

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**What are  
Selected  
Populations?**

A selected population is a group or population within a universal population that is defined by increased risk for experiencing or perpetrating sexual violence based on one or more modifiable **risk factors** (Krug et. al., 2002). A selected population is always part of some universal population.

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**Example of  
Selected  
Populations**

Here is an example of a selected population:

Males ages 14-18 who have the following modifiable risk factors:

- o have hostile attitudes toward women;
- o drink to excess more than 2 times a week; and,
- o experience poor family functioning

This example identifies a selected population by connecting a risk group (males ages 14-18) with specific modifiable risk factors (i.e., attitudes, behaviors, and relationship factors) that increase their risk to perpetrate sexual violence.

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**Benefits to  
Identifying  
Selected  
Populations**

Identifying selected populations is also a critical aspect of primary prevention from the public health perspective. By knowing who is most affected by a problem states and communities can utilize resources more effectively and efficiently in their efforts to prevent sexual violence.

Individuals who are at higher risk of perpetrating or experiencing sexual violence can have strategies developed that better address their unique needs.

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## **Before and After Prevention Concept**

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Public health programs are often grouped into three prevention categories based on event occurrence. Sexual violence approaches can be divided into the following three categories:

- o **primary prevention:** approaches that take place **before** sexual violence has occurred to prevent initial perpetration or victimization;



- o **secondary prevention:** immediate responses **after** sexual violence has occurred to deal with the short-term consequences of violence; and,
  - o **tertiary prevention:** long-term responses **after** sexual violence has occurred to deal with the lasting consequences of violence and sex offender treatment program.
- (Sexual Violence Prevention: Beginning the Dialogue, Centers for Disease Control and Prevention, 2004).
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**Please Note:** CDC expects RPE grantees to implement sexual violence prevention programs that aim to prevent sexual violence from initially occurring.

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### **Integration of Before and After Prevention Concept and the Social Ecological Model**

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In the development and/or enhancement of RPE strategies/programs it is important that the strategies are primary prevention focused. **Table 3** provides a comparison of primary prevention strategies (preventing violence **before** it occurs), and secondary and tertiary prevention strategies that take place **after** violence has occurred) across all levels of the ecological model (Sexual Violence Prevention: Beginning the Dialogue, Centers for Disease Control and Prevention, 2004).

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**Table 3: The BEFORE and AFTER Matrix**

	<b>Individual</b>	<b>Relationship</b>	<b>Community</b>	<b>Societal</b>
<b>Before (Primary Prevention)</b>	Implement and evaluate discussion groups among men that explore prevalent notions of masculinity and their relationship with sexual violence; healthy and respectful relationship; and men's role in prevention sexual violence.	Implement and evaluate a discussion group based intervention with male peer groups (e.g. fraternities, athletic teams) to change group norms that support and condone sexual harassment and violence. Men will learn to hold their peers accountable for attitudes and behaviors that support sexual violence.	Engage youth as agents of change to affect their school's climate of tolerance for sexualized bullying by leading classroom-based conversations with school-wide special events.	Assist in educating legislators about the importance of economic and educational policies that promote the economic status of women and reduce inequalities in employment.
<b>After (Secondary and Tertiary Prevention)</b>	Provide offender treatment services for perpetrators.  Provide crisis intervention services for sexual assault survivors.	Provide services to family members of sexual assault survivors to assist them in resolving the impact of the assault and to help them be sensitive and supportive of the survivor.	Develop police protocols for responding to and investigating reports of sexual assaults.  Hold "Take Back the Night" rallies to raise community awareness of the scope, nature, and impact of sexual violence.	Assist in educating legislators about the importance of mandatory legislation that ensures all survivors of sexual assault the provision of a forensic medical exam at no charge.

### **Principles of Effective Education Prevention Programs (Educational Training)**

According to the **2003 Nation et. al article (Appendix A)**; there are nine principles that can help prevention practitioners select, modify, or create more effective education programs. These nine principles are:

1. Comprehensive
2. Varied Teaching Methods (Active, Skill-based Teaching Activities)
3. Sufficient Dosage
4. Theory Driven
5. Positive Relationships

6. Appropriately Timed
7. Socio-culturally Relevant
8. Outcome Evaluation
9. Well-trained Staff

Definitions for the prevention principles in the section below. Refer to **Nation et. al article (Appendix A)** for detailed information regarding the prevention principles.

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**Please Note:** Refer to the information below regarding incorporating principles into prevention programming:

- o How to Enhance Legislatively Approved Prevention Activities section;
  - o **Draft Rape Prevention and Education (RPE) Practice Guidelines (Appendix B); and,**
  - o **Draft Framework for Enhancing Activities for Primary Prevention of Sexual Violence (Appendix C)**
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### Principles of Effective Programs Definitions

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<b>Comprehensive</b>	Multicomponent approaches that address critical domains (e.g. family, peers, community) that influence the development and perpetuation of the behaviors to be prevented.
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<b>Varied Teaching Methods</b>	Programs which involve diverse teaching methods that focuses on increasing the awareness and understanding of the problem behaviors and on acquiring or enhancing skills.
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**Please Note:** If using GTO IPV/SV, the CDC GTO Development Team refers to this principle as Active, Skill-based Teaching Activities.

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<b>Sufficient Dosage</b>	Programs that provide enough intervention to produce the desired effects and provide follow-up as necessary to maintain effects.
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**Theory  
Driven**

Programs that have theoretical justifications that are based on accurate information, and are supported by empirical research.

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**Positive  
Relationships**

Programs that provide exposure to adults and peers in a way which promotes strong relationships and supports positive outcomes.

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**Appropriately  
Timed**

Programs that are initiated early enough to have an impact on the development of the problem behavior and are sensitive to the developmental needs of participants.

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**Socio-  
culturally  
Relevant**

Programs that are tailored to the community and cultural norms of the participants and make efforts to include the target group in program planning and implementation.

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**Outcome  
Evaluation**

Programs that have clear goals and objectives and make an effort to systemically document their results relative to the goals.

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**Well-trained  
Staff**

Program staff that support the program and are provided with training regarding the implementation of the intervention.

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**Integration of the Comprehensive Prevention Principle and the Social  
Ecological Model**

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Addressing the prevention principle of comprehensive involves the creation of a comprehensive prevention program, which is the combination of complementary and synergistic prevention strategies across the levels of the social ecology that address the needs of a universal or selected population.

Strategies are complementary and synergistic when they focus on the same group and when a strategy implemented at one level of the social ecology reinforces a strategy at another level of the social ecology. The strategies at different levels of the social ecology address the same risk or protective factors.

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The social ecological model supports the comprehensive prevention principle by addressing an individual's risk factors as well as norms, beliefs, and social and economic systems that create the conditions for the occurrence of sexual violence.

For instance, a school may implement a teen dating violence curriculum (an individual level strategy) and complement it with a parenting strategy (a relationship level strategy). Within the parenting strategy, parents would be encouraged to reinforce messages about healthy dating when interacting with their children. The synergy between two strategies occurs when the two strategies together have more of a preventative effect than either strategy alone.

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No single factor at any level of the social ecology can explain why certain individuals perpetrate sexual violence (Dahlberg & Krug, 2002) or why certain groups are more at risk for sexual violence victimization, thus comprehensive prevention programs to prevent sexual violence are needed.

Comprehensive prevention programs attempt to address the complex interplay of risk and protective factors with a complementary mix of strategies across the various levels of the social ecology. Strategies that focus only on one level of the social ecology are unable to address this complex interplay of risk and protective factors.

Thus, to increase the effectiveness of RPE programs/strategies, the strategies/programs should address several levels of the social ecological model.

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In developing a comprehensive primary prevention program, grantees and their planning committees should strive to develop:

- o a continuum of program/strategies throughout the various levels of the social ecological model (Figure 1); and,
- o appropriate programs/strategies conducted over several lifestages; as these are more likely to promote and sustain sexual violence prevention across a lifetime, rather than a single intervention or a single policy change.

Additional information regarding lifestages can be found in the CDC Goals and Lifestages section of this guidance document.

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## Example

**Figure 2** illustrates an example of a comprehensive primary prevention strategy in a school setting using an ecological approach.

A school-based curriculum focused on shifting gender roles and defining healthy relationships for a group of 8th graders is working to influence the **student (Individual level change)** as the curriculum works to change individual knowledge, attitudes and behaviors. Although it is set in a school, the change does not take place school wide as the culture of the school has not been addressed.

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The change is being pursued one person at a time through the curriculum. To make this effort comprehensive, additional activities are necessary. Thus your program plan might include a pilot program focused on young boys working to influence peer group norms (**Relationship level change**) that are supportive of sexual harassment and sexual violence.

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For additional comprehensiveness, a school working group might be formed to change the policies and procedures of the school thus changing its climate and environment concerning the acceptance of violence as a norm and honoring and modeling respectful and positive interactions. This is a **Community level change** that will, hopefully, support and reinforce changes in individual behavior.

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Ideally, individual, relationship and community change would be pursued within this school and supported by **Societal level changes** being implemented by a local rape crisis center is implementing a community wide sexual violence prevention initiative that includes a focus on positive youth development.

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**Figure 2: Comprehensive School- based Program and Ecological Model Example**

